

01807.001618.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

FELIX HENRY ET AL.

Appln. No.: 09/910,927

Filed: July 24, 2001

For: METHOD AND DEVICE FOR  
ALERTING DURING  
PROGRESSIVE DECODING OF  
A DIGITAL IMAGE CODED  
WITH A REGION OF INTEREST

Examiner: C. Larose

Group Art Unit: 2623

**RECEIVED**

NOV 29 2004

Technology Center 2600

November 19, 2004

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of August 19, 2004, please amend the above-identified application as follows, the specification changes being reflected at page 2, the claim changes being reflected in the listing that begins at page 3, the Remarks beginning at page 8, and a clean version of the amended abstract being at page 13.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on

November 19, 2004

(Date of Deposit)

RAYMOND A. DIPERNA (Reg. No. 44,063)

(Name of Attorney for Applicant)

Signature

November 19, 2004

Date of Signature



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Docket No. 01807.001618.

Technology Center 2600

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Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 19	MINUS	** 20	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 2	MINUS	*** 3	= 0	x \$43 \$86	\$0
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ A check in the amount of \$\_\_\_\_\_ is enclosed.

☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

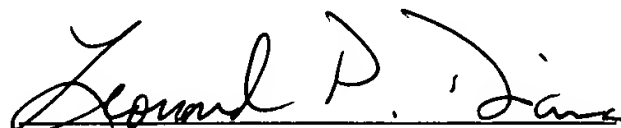
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$\_\_\_\_\_ to cover the fee for a \_\_\_\_-month extension is enclosed.

☐ A check in the amount of \$\_\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Leonard P. Diana  
Attorney for Applicants  
Registration No. 29,296

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New York, New York 10112-3801  
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Form #120

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